

## **APPLICATION DATA SHEET**

### **APPLICATION INFORMATION**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Title:: Network Healing Smart Fiber Optic Switch

Attorney Docket Number:: 26308.01

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 4

Total Drawing Sheets:: 6

Small Entity:: Yes

Petition Included:: No

Petition Type::

Secrecy Order in Parent Appl.?:: No

## **APPLICANT INFORMATION**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Family Name:: Carberry  
Name Suffix::  
City of Residence:: Talbot  
State or Province of Residence:: Tennessee  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 2814 Lake Forest Circle  
City of Mailing Address:: Talbot  
State or Province of Mailing Address:: TN  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 37877

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael L.  
Family Name:: Smith  
Name Suffix::  
City of Residence:: Jefferson City  
State or Province of Residence:: Tennessee  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 238 Fieldcrest Drive  
City of Mailing Address:: Jefferson City  
State or Province of Mailing Address:: TN  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 37760

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Family Name:: Racinskas  
Name Suffix::  
City of Residence:: Coppell  
State or Province of Residence:: Texas  
Country of Residence:: U.S.A.  
Street of Mailing Address:: 224 Mockingbird Lane  
City of Mailing Address:: Coppell  
State or Province of Mailing Address:: TX  
Country of Mailing Address:: U.S.A.  
Postal or Zip Code of Mailing Address:: 75019

## CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22465  
Phone Number:: 865-584-0105  
Fax Number:: 865-584-0104  
E-Mail Address:: [Tkulaga@pitts-brittian.com](mailto:Tkulaga@pitts-brittian.com)

## REPRESENTATIVE INFORMATION

Representative Customer Number::	22465	
----------------------------------	-------	--

## DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation-in-part of	09/649,455	08/25/00